



# Application for Salvage Certificate of a Vehicle

Fee – \$5.00

Make checks payable to "State of "Montana"

Office Use Only

1003 Buckskin Drive, Deer Lodge, MT 59722-2375 • Phone (406) 846-6000 Fax (406) 846-6039 • [mvdtitleinfo@mt.gov](mailto:mvdtitleinfo@mt.gov)

\*\*\*\*\* See page 2 for instructions \*\*\*\*\*

Certificate No. (office use only) \_\_\_\_\_

Applicant Information	1. I am/we are the applicant(s) making claim of ownership on the following motor vehicle to obtain a Salvage Certificate for that vehicle pursuant to Montana law.			
	Business Name if Applicable _____			
	Legal Name of First Applicant if Individual _____		Driver License Number _____	
	Legal Name of Second Applicant if Individual _____		Driver License Number _____	
	2. Residential or Business Address _____			
	Street	City	State	Zip
	3. Mailing Address _____			
	Street	City	State	Zip
	4. County of Residence _____			

Vehicle Description	5. Vehicle Identification Number _____		6. Year _____	7. Make _____	
	8. Model _____	9. Body Style _____	10. Color _____	11. Title No. (must surrender title with this form) _____	12. State of Issuance _____

Certification of Salvage Vehicle	13. I/we certify that the vehicle described above has been damaged by collision, fire, flood, accident, trespass, or other occurrence to the extent that the cost of parts and labor makes it uneconomical to repair and it meets the definition of a salvage vehicle. It has been declared a salvage vehicle by (check only one):				
	14. <input type="checkbox"/> the insurer named as the applicant on this form;				
	15. <input type="checkbox"/> the insurer, but that pursuant to an agreed settlement between the owner and the insurer, the owner will retain ownership of the vehicle and is therefore named as applicant on this form; or				
	16. <input type="checkbox"/> the owner or other person acting on behalf of the owner (excluding an insurer) named as the applicant on this form.				
	17. I/we further certify that:				
	<ul style="list-style-type: none"> <li>I/we have compared the vehicle identification number shown on the face of this application with the vehicle identification plate affixed to the vehicle and they agree in every particular.</li> <li>under penalty of law (<b>Section 45-7-203, MCA, Unsworn Falsification to Authorities</b>) the statements made on this form are true and correct to the best of my/our knowledge, information and belief, that I am/we are the same person(s) named on line one, and if signing for a commercial entity, I/we have full authority to do so.</li> </ul>				
	Dated this _____ day of _____ 20 _____				
	Applicant's signature – this is my legal signature (only one signature is required)		Printed name of applicant		Driver License Number

**\* Title must be surrendered with this application\***

## Who May Complete This Form?

Any insurer, owner, or person acting on behalf of the owner who determines that a damaged vehicle meets the definition of a salvage vehicle as disclosed on line 13 of this application.

### Instructions

-- Please Type or Print Legibly --

1. Enter the applicant information on lines 1 through 4. The salvage certificate will be sent to the address on line 3.
2. Provide a description of the vehicle and supporting documentation by completing lines 5 through 12. Title must be surrendered with this application.
3. Under line 13, check **only one** box depending upon your status as applicant:
  - Line 14 if you are an insurance company settling at a total loss;
  - Line 15 if you are the original owner of the vehicle and you are retaining the salvage vehicle under an agreement between yourself and your insurer; or
  - Line 16 if you are the owner of the salvage vehicle, or other person acting on behalf of the owner of the vehicle, and you have determined that the vehicle meets the legal definition of a salvage vehicle.
4. Sign and date the form under part 17.
5. Return this form, properly assigned title\*, satisfaction or release of a security interest or lien (if applicable), and \$5.00 to:

Department of Justice  
Motor Vehicle Division  
Title and Registration Bureau  
1003 Buckskin Drive  
Deer Lodge MT 59722-2375

\* If the title is transferred from the owner to the insurance company, or from the owner to a person acting on behalf of the owner, the certificate must be properly signed-off and an odometer disclosure statement provided in accordance with state and federal laws.
6. Insurance companies must attach a legible copy of their damage report and surrender the required documentation no later than 15 days after receiving the title from the owner.